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To: Examiner Khanh Tran  
USPTO, Mail Stop Amendment

Phone:

Fax: 571-273-8300

From: Lorna L. Schott  
Patent Administrator

Phone: 310-812-1534

Total number of pages (including lead sheet) - 39

Subject: Docket No. 20-0136 Application No. 09/883,651 Filed: 6/18/01

Per your request, I am resending the amendment to the 11/2/04 Office Action and a copy of the Auto-Reply Transmission which were originally fax filed on January 27, 2005. If you have any questions, please give me a call.

Thank you for your attention in this matter.

USPTO



TO: Fax Sender at 312 346 2810

Fax Information  
Date Received: 1/27/2005 3:27:12 PM (Eastern Standard Time)  
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PAGE 2/39 \* RCVD AT 9/7/2005 3:13:10 PM [Eastern Daylight Time] \* SVR:USPTO-EFXRF-6/25 \* DNIS:2738300 \* CSID:310 812 2687 \* DURATION (mm-ss):08-04



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PTO/SB/21 (09-04)  
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<b>TRANSMITTAL FORM</b> <small>(to be used for all correspondence after initial filing)</small>	Application Number	09/883,651
	Filing Date	08/18/2001
	First Named Inventor	Gafins
	Art Unit	2631
	Examiner Name	Khanh C. Tran
Total Number of Pages In This Submission	Attorney Docket Number	NGC-195/22-0138

ENCLOSURES (Check all that apply)		
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement  <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers  <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address <input checked="" type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD  Remarks	<input type="checkbox"/> After Allowance Communication to TC  <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences  <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)  <input type="checkbox"/> Proprietary Information  <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): Credit Card Payment Form; and U.S. Patent and Trademark Office Notice of Recordation of Assignment Document

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT			
Firm Name	Patil & Brill, LLC		
Signature	<i>Robert J. Brill</i>		
Printed name	Robert J. Brill		
Date	January 27, 2005	Reg. No.	38,760

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Signature	<i>Robert J. Brill</i>		
Typed or printed name	Robert J. Brill	Date	January 27, 2005

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